

# P16000081373

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

\_\_\_\_\_  
(Business Entity Name)

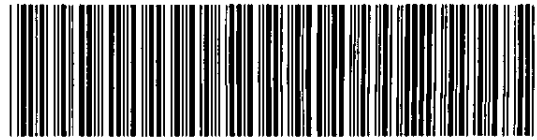
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(Document Number)

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N. SAMS  
OCT 06 2016



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09/12/16--01023--023 \*\*78.75

2016 SEP 12 PM 12:26  
STORE MAIL ROOM  
TALLAHASSEE, FL 32309



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

September 16, 2016

STEPHANIE ACAR  
1644 SIKVER STREET  
JACKSONVILLE, FL 32206

SUBJECT: STEPHANIE ACAR PHOTOGRAPHY, INC.  
Ref. Number: W16000064188

2016 SEP 12 PM 12:28  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

We have received your document for STEPHANIE ACAR PHOTOGRAPHY, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Nadira D McClees-Sams  
Regulatory Specialist II

Letter Number: 416A00019876

## COVER LETTER

Department of State  
New Filing Section  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

**SUBJECT:** Stephanie Acar Photography, Inc.

**(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)**

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00  
Filing Fee

☒ \$78.75  
Filing Fee  
& Certificate of Status

☐ \$78.75  
Filing Fee  
& Certified Copy

☐ \$87.50  
Filing Fee,  
Certified Copy  
& Certificate of  
Status

**ADDITIONAL COPY REQUIRED**

**FROM:** Stephanie Acar  
\_\_\_\_\_  
Name (Printed or typed)

1644 Silver Street  
\_\_\_\_\_  
Address

Jacksonville, Florida 32206  
\_\_\_\_\_  
City, State & Zip

352-870-9705  
\_\_\_\_\_  
Daytime Telephone number

info@stephanieacar.com  
\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

**NOTE: Please provide the original and one copy of the articles.**

**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

**ARTICLE I NAME**

The name of the corporation shall be: Stephanie Acar Photography INC

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

1644 Silver Street

Jacksonville, Florida 32206

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: To provide photography services for individuals and/or businesses.

**ARTICLE IV SHARES**

The number of shares of stock is: 10

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Stephanie Acar, President

Address: 1644 Silver Street

Jacksonville, Florida 32206

Name and Title: Soner Acar, Secretary

Address: 1644 Silver Street

Jacksonville, Florida 32206

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

2016 SEP 12 PM 12:28  
SECRETARY OF STATE  
-ALLAHASSEE, FLORIDA-

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address \_\_\_\_\_ Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

The **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:

Name: Stephanie Acar  
Address: 1644 Silver Street  
Jacksonville, Florida 32206

2016 SEP 12 PM 12:28  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE VII INCORPORATOR**

The **name and address** of the Incorporator is:

Name: Stephanie Acar  
Address: 1644 Silver Street  
Jacksonville, Florida 32206

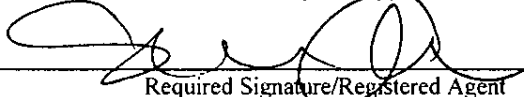
**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

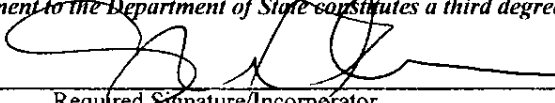
**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity*

  
Required Signature/Registered Agent

8/11/16  
Date

*I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.*

  
Required Signature/Incorporator

8/11/16  
Date